

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION | D.B. | 10005 | 9-29-00 |
| O.I.P.E. CLASSIFIER | | | 9-27-00 |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | 78619 | 5/16/00 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
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| Final | |
| Original | |
| 1 | 12/1/02 |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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